

Wirral Care & Support at Home Risk Register

Risk Descriptor	Potential Consequence	Risk Assessment				Control / Mitigation Action Plan	Residual Risk				Risk Owner		
		Probability	Impact				Risk Score	Probability	Impact			Risk Score	
			F	M	G				F	M			G
Staff attraction and retention.	<ul style="list-style-type: none"> Unmet needs Unable to meet contractual requirements. Strain on the hospital. Risk to service users. Strain on other services 	5	5	5	5	75	<ul style="list-style-type: none"> Career progression programme. Pay increase-consistency. Mandated guaranteed contracted hours. 	4	5	5	5	60	
OBA	<ul style="list-style-type: none"> Lack of transparency/trust. Risk-no gain. Complexity of own organisation not aware of process. 	3	3	3	3	27	<ul style="list-style-type: none"> Not mandatory. Guaranteed hours for life of contract. Incentivised. 	2	2	2	2	12	
Business Process	<ul style="list-style-type: none"> Current process remains fragmented. Missed communication. Different offer to different organisations/people. Unmanaged demand in capacity. 	3	3	3	3	27	<ul style="list-style-type: none"> Reviewing existing process. Streamline. Consistent offer. Capacity v demand planning. 	2	2	2	2	12	
Acute hospital admission/discharge	<ul style="list-style-type: none"> Unsafe discharge. Reduced flow. Budget failure. Unable to meet demand. Reputation. Service breach. 	5	5	5	5	75	<ul style="list-style-type: none"> Utilising technologies. Business processing. Partnering with 3rd sector. Brokerage process. Trusted assessor. Transparency. 	3	3	3	3	27	
Financial Sustainability	<ul style="list-style-type: none"> Market failure. Rising budget. Service user's needs not met. Unemployment. 	3	5	4	4	65	<ul style="list-style-type: none"> New model for Dom care. Budget controls-innovation. Use of technologies. Outcomes focused. Trusted assessor Collaboration/partnership working. 						
Lack of Technologies/Innovation	<ul style="list-style-type: none"> Rising demand. Market efficiency. Collaboration-lack of financial impact. 	4	3	3	3	36	<ul style="list-style-type: none"> Research-implement-review. Intelligence. Budget control. Partnership-open & honest 						
Direct Payment	<ul style="list-style-type: none"> Inappropriate use of money. None regulated staff (no DBS). Risk of abuse/neglect. Very little control. 	5	5	5	5	75	<ul style="list-style-type: none"> Level personalised rates across the board. Monitoring/checks. Audits. Penalties in place. Enforcement. 	1	2	2	2	6	

Risk Impact Scoring

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External Organisation impact on Dom care	<ul style="list-style-type: none"> Failing to work collaboratively will lead to fail. Animosity between services. Waste of resources. 	4	5	5	5	75	<ul style="list-style-type: none"> Workshops. Incentivise –shared gain/risk. Sharing resources. Shared data. 	1	4	4	4	12	
Length of Contract	<ul style="list-style-type: none"> Uncertainty. Long term view-costings. Contract commitment. Sustainability/investments. Affordability. Recruitment. Uneasy workforce. 	3	4	4	4	36	<ul style="list-style-type: none"> Longer term contract, allows opportunity to develop and invest more. Drive cost efficiencies. Procurement. 	1	1	1	1	3	
Culture	<ul style="list-style-type: none"> Domiciliary care provision is wholly dependent on people for delivery. New ways of working are required to meet existing and emerging market challenges. People are naturally resistant to change. If people do not adapt to new ways of working the new delivery and commercial models will fail impacting on service standards and financial performance. 	5	5	5	5	75	<ul style="list-style-type: none"> Leadership recognition and acknowledgement. Allocate resource to implement culture intervention. Implement cultural innovation program. Monitor impact. 	2	3	3	3	18	
Demand	<ul style="list-style-type: none"> Unable to meet demand. Service user failure/safeguarding. Provider failure. Contractual implications. Over subscription. 	5	5	5	5	75	<ul style="list-style-type: none"> Staff recruitment processes in place. Working together to cover market and demand – partnership. Collaborative working. Limit contracted providers we commission with. Training-upskill. Increase providers services-whole approach. 	2	2	2	2	12	
Legislative	<ul style="list-style-type: none"> Increased costs to system. Recruitment impact. Provider sustainability. 	3	5	4	3	36	<ul style="list-style-type: none"> Consider contingency. Budget if changes are expected. Providers integrated working for sharing functions to reduce cost impact. 	2	2	2	2	12	
Publicity & Reputation	<ul style="list-style-type: none"> Negative publicity. Not represented correctly. Recruitment. Lack of confidence. Suspension. 	5	5	5	5	75	<ul style="list-style-type: none"> Positive news stories. Real life positive outcomes. Schools/colleges involvement. Transparent approach. Communication. 	2	2	2	2	12	
Governance and Leadership should providers collaborate	<ul style="list-style-type: none"> Project plan. CQC compliance. Lack of structure. Each organisation internal governance. 						<ul style="list-style-type: none"> Establish a board. Identify lead representatives. MOU. Mutual agreement. 'Professional' oversight. 						

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	<ul style="list-style-type: none"> QA framework Delegated authority. Legislative requirements. 					<ul style="list-style-type: none"> Project plan. Discuss with CQC. Values. 							
Co-ordination of Transformation	<ul style="list-style-type: none"> Not co-ordinated. Misses the culture change. Business process not aligned. Resilience to change. Business process. Technology. Budgetary impact. 					<ul style="list-style-type: none"> Communication. Need to cover any provider who might pull out. Establish and agree the procurement. Establish partner project plan. Timescales. Whole system approach. Business process mapping. 							
Mobilisation/change to supply chain	<ul style="list-style-type: none"> Negative impact on service user. Tupe risk. Workforce delivery. Impact on market. Sustainability. Legal issues. 					<ul style="list-style-type: none"> Joint review. Establish a board. Comms strategy. Establish procurement model to legal framework. Timescales/project plan. Write and agree workforce plan. 							
Demand continues to grow unchecked	<ul style="list-style-type: none"> Market unable to keep up with demand and service users' needs go unmet or not delivered to required service standards Commissioners budgets are exceeded Providers CQC ratings put at risk because of demand on the system 	5	5		25	Demand management strategy which is performance managed <ul style="list-style-type: none"> Assets based approach Strengths based approach Signposting Developing community assets Developing 3rd sector assets Objective – Zero growth year on year Target – Year on year demand reduction	2	4	8				
Market capacity	<ul style="list-style-type: none"> Insufficient Providers in market who are convinced of viability of the local market in terms of making long term investments in their local business units Low levels of collaboration between existing Providers inhibiting realisation of potential cost savings and efficiency gains 	5	4		20	Develop procurement strategy for new framework based on; <ul style="list-style-type: none"> Open and equity based engagement with supply chain to gain their input to what will represent a sustainable proposition for them pre- ITT Partnering based governance structure for new framework to; - <ul style="list-style-type: none"> improve decision making via the input of the experience of all partners increase ownership and commitment facilitate collaboration embed continuous improvement in the operating culture Open Book Accounting to be used as a base for the commercial management of the framework to: - <ul style="list-style-type: none"> provide transparency to all partners to make all partners responsible for cost provide visibility on potential efficiency gains across both Commissioners and Providers business processes support value management throughout the life of the contract demonstrate public accountability for expenditure against the Wirral £ Partnership Board and Governance structure to performance management and benefit report on the impact of collaboration	2	3	6				

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	<ul style="list-style-type: none"> Market unable secure and retain sufficient resource to keep up with demand and service users' needs to unmet or not delivered to required service standards Not being able to meet specialist provision for CHC & End of Life 					Develop a Wirral wide ATTRACT – RETAIN - DEVELOP strategy for care workers. Key elements to include: - <ul style="list-style-type: none"> Develop a career path for care workers Identify savings that can be directed to improving care worker T&C's Comm's strategy to improve profile of care worker role and attractiveness as a career Care worker recruitment and retention incorporated as a KPI in framework incentivisation model Meeting with current provider of this provision Detailed specification on service requirements 							
Utilisation	<ul style="list-style-type: none"> Provider Partners having secured capacity are then unable to optimise utilisation leading to financial loss 	3	2		6	<ul style="list-style-type: none"> Improved demand forecasts from Commissioners developed collaboratively with Provider Partners providing clarity on base loads and seasonal variation Based on forecasts guaranteed hours offered to Provider partners for annual or seasonal base loads Penalty payments for Providers failing to meet guaranteed hours commitment Annual workload allocation to Provider Partners determined by Partnership Board based on historical performance against KPI's 	1	2	2				
Provider Partner Sustainability	<ul style="list-style-type: none"> ITT thought not to be commercially viable then the potential exists for insufficient bidders or inappropriate bidders Provider Partners cannot make the framework commercially viable throughout life of framework Cost to Commissioners of either scenario above in terms of: <ul style="list-style-type: none"> Impact on statutory duties Impact on service users Cost of change 	4	5		20	<ul style="list-style-type: none"> Market engagement exercise pre-ITT Utilisation of Open Book Accounting and proactive Risk Management during the life of the contract 	3	3	9				
Changes to Legislation / Regulation / Service Standards	<ul style="list-style-type: none"> If not addressed in the new contract the Provider will be exposed to changes in legislation that might impact on their costs and viability Providers will therefore have to price that risk The pricing of the risk will most likely either be excessive, leading to avoidably high delivery costs to Commissioners; or they will under-price put at jeopardy their sustainability as a Provider over the life of the 	4	5		20	<ul style="list-style-type: none"> Exclude risk in contract terms and include transparent process based on open book accounting principles for calculating impact of change Commissioners to build contingency for such changes into overall budget on the basis of open book accounting principles 	0	0	0				

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	contract leading to withdrawal, impact on service delivery and reputational and cost of change impact on the Commissioners												
Inflation	<ul style="list-style-type: none"> The pricing of the risk will most likely either be excessive, leading to avoidably high delivery costs to Commissioners; or they will under-price put at jeopardy their sustainability as a Provider over the life of the contract leading to withdrawal, impact on service delivery and reputational and cost of change impact on the Commissioners 	3	3		12	<ul style="list-style-type: none"> Exclude risk in contract terms and include transparent process based on open book accounting principles for calculating impact of change Commissioners to build contingency for such changes into overall budget on the basis of open book accounting principles 	0	0	0				

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